In re Application of:

KAZUYUKI KURODA ET AL.

Application No.: 09/478,884

Filed: January 7, 2000

For: MESOSTRUCTURED MATERIALS,

SILICA MESOSTRUCTURED MATERIALS, PREPARATION METHODS THEREOF AND CONTROL METHOD OF MESOPORE ORIENTATION

Date: March 20, 2002

Docket No. 03500.014215

Examiner: C. Simone

Group Art Unit: 1772

THE COMMISSIONER FOR PATENTS Washington, D.C. 20231

RECEIVED Sir: APR 0 3 2002

* Transmitted herewith is an amendment in the above-identified application.

TC 1700

No additional fee is required.

The fee has been calculated as shown below

| . [| CLAIMS AS AMENDED | | | | | | |
|-----|---|--|-------|--|-------------------------|----------------|-------------------|
| | | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| | TOTAL CLAIMS | * 79 | MINUS | ** 76 | = 3 | x \$9 \$18 | \$54.00 |
| | INDEP. CLAIMS | * 9 | MINUS | *** | = 1 | x \$42 \$84 | \$84.00 |
| Į | Fee for Mu | Fee for Multiple Dependent claims \$140°/\$280 | | | | | |
| | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$138.00 | |

- If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

| X | A check in the amount of \$_138.00\] is enclosed. | | | | |
|---|---|--|--|--|--|
| | Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed | | | | |
| X | Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed. | | | | |
| | A check in the amount of \$ to cover the fee for a month extension is enclosed. | | | | |
| | A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed. | | | | |
| X | Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below. | | | | |
| | Respectfully submitted, | | | | |
| | Agorney for Applicants Registration No. 48,512 | | | | |

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

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